

County: Marathon
KENNEDY PARK MEDICAL & REHABILITATION
6001 ALDERSON STREET

Facility ID: 3380

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SCHOFIELD 54476 Phone: (715) 359-4257
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 136
Total Licensed Bed Capacity (12/31/01): 160
Number of Residents on 12/31/01: 128

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 127

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		48.4
Supp. Home Care-Personal Care	No					1 - 4 Years		35.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.8	More Than 4 Years		16.4
Day Services	No	Mental Illness (Org./Psy)	41.4	65 - 74	9.4			-----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	28.1			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.8	85 - 94	54.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.5		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	10.9	65 & Over	99.2	-----		
Transportation	No	Cerebrovascular	10.2		-----	RNs		11.9
Referral Service	No	Diabetes	3.9	Sex	%	LPNs		7.2
Other Services	Yes	Respiratory	1.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	25.0	Male	28.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	71.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	1	4.8	344	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.8
Skilled Care	20	95.2	308	91	97.8	101	0	0.0	0	14	100.0	164	0	0.0	0	0	0.0	0	125	97.7
Intermediate	---	---	---	2	2.2	83	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	21	100.0		93	100.0		0	0.0		14	100.0		0	0.0		0	0.0		128	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	2.8	Daily Living (ADL)	Independent			
Private Home/With Home Health	3.4	Bathing	2.3	72.7	25.0	128
Other Nursing Homes	2.8	Dressing	20.3	42.2	37.5	128
Acute Care Hospitals	85.4	Transferring	40.6	30.5	28.9	128
Psych. Hosp. -MR/DD Facilities	2.2	Toilet Use	32.8	25.8	41.4	128
Rehabilitation Hospitals	0.0	Eating	62.5	10.2	27.3	128
Other Locations	3.4	*****				
Total Number of Admissions	178	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	4.7	Receiving Respiratory Care		7.8
Private Home/No Home Health	6.3	Occ/Freq. Incontinent of Bladder	45.3	Receiving Tracheostomy Care		0.8
Private Home/With Home Health	31.4	Occ/Freq. Incontinent of Bowel	32.8	Receiving Suctioning		0.0
Other Nursing Homes	5.7			Receiving Ostomy Care		3.1
Acute Care Hospitals	21.1	Mobility		Receiving Tube Feeding		0.8
Psych. Hosp. -MR/DD Facilities	2.3	Physically Restrained	4.7	Receiving Mechanically Altered Diets		21.1
Rehabilitation Hospitals	0.0					
Other Locations	9.1	Skin Care		Other Resident Characteristics		
Deaths	24.0	With Pressure Sores	1.6	Have Advance Directives		100.0
Total Number of Discharges (Including Deaths)	175	With Rashes	3.1	Medications		
				Receiving Psychoactive Drugs		16.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 100-199 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	78.9	82.7 0.95	83.8 0.94	84.3 0.94	84.6	0.93
Current Residents from In-County	87.5	82.1 1.07	84.9 1.03	82.7 1.06	77.0	1.14
Admissions from In-County, Still Residing	30.9	18.6 1.66	21.5 1.44	21.6 1.43	20.8	1.48
Admissions/Average Daily Census	140.2	178.7 0.78	155.8 0.90	137.9 1.02	128.9	1.09
Discharges/Average Daily Census	137.8	179.9 0.77	156.2 0.88	139.0 0.99	130.0	1.06
Discharges To Private Residence/Average Daily Census	52.0	76.7 0.68	61.3 0.85	55.2 0.94	52.8	0.98
Residents Receiving Skilled Care	98.4	93.6 1.05	93.3 1.05	91.8 1.07	85.3	1.15
Residents Aged 65 and Older	99.2	93.4 1.06	92.7 1.07	92.5 1.07	87.5	1.13
Title 19 (Medicaid) Funded Residents	72.7	63.4 1.15	64.8 1.12	64.3 1.13	68.7	1.06
Private Pay Funded Residents	10.9	23.0 0.47	23.3 0.47	25.6 0.43	22.0	0.50
Developmentally Disabled Residents	0.0	0.7 0.00	0.9 0.00	1.2 0.00	7.6	0.00
Mentally Ill Residents	41.4	30.1 1.38	37.7 1.10	37.4 1.11	33.8	1.23
General Medical Service Residents	25.0	23.3 1.07	21.3 1.17	21.2 1.18	19.4	1.29
Impaired ADL (Mean)	50.5	48.6 1.04	49.6 1.02	49.6 1.02	49.3	1.02
Psychological Problems	16.4	50.3 0.33	53.5 0.31	54.1 0.30	51.9	0.32
Nursing Care Required (Mean)	4.8	6.2 0.77	6.5 0.74	6.5 0.73	7.3	0.65